

# Notice of Emergency Removal, Objection to Removal, and Order After Hearing

Clerk stamps date here when form is filed.

## 1 To:

- a. Court: \_\_\_\_\_
- b. Designated prospective adoptive parent or caregiver who may fit the definition of "prospective adoptive parent" (*name each*): \_\_\_\_\_  
\_\_\_\_\_
- c. Child's attorney (*name*): \_\_\_\_\_
- d. Child, if 10 years of age or older (*name*): \_\_\_\_\_
- e. Child's identified Indian tribe, if any (*name*): \_\_\_\_\_  
\_\_\_\_\_
- f. Child's Indian custodian, if any (*name*): \_\_\_\_\_  
\_\_\_\_\_
- g. Child's Court Appointed Special Advocate (CASA) program, if any (*name of person notified*): \_\_\_\_\_  
\_\_\_\_\_

Fill in court name and street address:

Superior Court of California, County of \_\_\_\_\_

Fill in child's name and date of birth:

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Clerk fills in case number when form is filed.

Case Number: \_\_\_\_\_

## 2 Name of adoption agency: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

The adoption agency has removed (*name of child*): \_\_\_\_\_ from his or her current home because of an immediate risk of harm (*explain*): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 3 **If you do not agree with the removal, you may request a court hearing by filling out the part of this form called **Objection to Removal** and file it with the court within five court days or seven calendar days, whichever is longer, from the date you receive this notice. If the court has not designated the caregiver as a prospective adoptive parent, you must complete form JV-321, Request for Prospective Adoptive Parent Designation, Notice, and Order and file it with this form.**

Child's name: \_\_\_\_\_

**Proof of Notice**

- ④ Notice of the time and place of the emergency removal was given to:
- a. ☐ The court (*name of court employee notified*): \_\_\_\_\_
- (1) ☐ Orally, in person, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- (2) ☐ Orally, by telephone, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- Phone number: \_\_\_\_\_
- b. ☐ The caregiver (*name*): \_\_\_\_\_
- (1) ☐ Orally, in person, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- (2) ☐ Orally, by telephone, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- Phone number: \_\_\_\_\_ or ☐ Confidential phone number in court file
- c. ☐ The child's attorney (*name*): \_\_\_\_\_
- (1) ☐ Orally, in person, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- (2) ☐ Orally, by telephone, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- Phone number: \_\_\_\_\_
- d. ☐ The child, if 10 years of age or older (*name*): \_\_\_\_\_
- (1) ☐ Orally, in person, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- (2) ☐ Orally, by telephone, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- Phone number: \_\_\_\_\_ or ☐ Confidential phone number in court file
- e. ☐ The child's identified Indian tribe (*name of tribal representative notified*): \_\_\_\_\_
- (1) ☐ Orally, in person, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- (2) ☐ Orally, by telephone, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- Phone number: \_\_\_\_\_
- f. ☐ The child's Indian custodian (*name*): \_\_\_\_\_
- (1) ☐ Orally, in person, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- (2) ☐ Orally, by telephone, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- Phone number: \_\_\_\_\_
- g. ☐ The child's Court Appointed Special Advocate (CASA) program (*name of person notified*): \_\_\_\_\_
- (1) ☐ Orally, in person, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- (2) ☐ Orally, by telephone, on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_
- Phone number: \_\_\_\_\_

- ⑤ At the time of the notice I was at least 18 years of age and not a party to this matter. I live or am employed in the county where the notice was given. My residence or business address is (*specify*): \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the information in items 4 and 5 is true and correct, which means if I lie on this form, I am committing a crime.

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or print your name\_\_\_\_\_  
Sign your name

Child's name: \_\_\_\_\_

Case Number: \_\_\_\_\_

## OBJECTION TO REMOVAL

*If you do not agree with the removal, you can request a court hearing by filling out this form. Bring this form to the clerk of the court. If you want to keep an address or phone number confidential, fill out form JV-322, Confidential Information—Prospective Adoptive Parent, and do not write the address or phone number on this form.*

*If you are a caregiver or the child, the clerk of the court will set a hearing date and let you know what it is.*

*If you are the child's attorney, you must provide notice of the hearing.*

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of \_\_\_\_\_

⑥ Information about the person or persons objecting to the removal:

- a. Name: \_\_\_\_\_
- b. Name: \_\_\_\_\_
- c. Phone number: \_\_\_\_\_
- d. Address: \_\_\_\_\_

⑦ If you (*the person objecting to the removal*) are not the caregiver, fill out below.

- a. My name: \_\_\_\_\_
- b. I am the ☐ child ☐ child's attorney ☐ other (*specify role*): \_\_\_\_\_
- c. My phone number: \_\_\_\_\_
- d. My address: \_\_\_\_\_

⑧ If you are not the child's attorney and you know who the child's attorney is, fill out below.

- a. Name of child's attorney: \_\_\_\_\_
- b. Phone number of child's attorney: \_\_\_\_\_
- c. Address of child's attorney: \_\_\_\_\_

⑨ ☐ The child is 10 years of age or older. Child's phone number: \_\_\_\_\_

⑩ ☐ The child has an identified Indian tribe (*specify tribe*): \_\_\_\_\_  
Phone number of tribe: \_\_\_\_\_

⑪ ☐ The child has a Court Appointed Special Advocate (CASA) volunteer.  
Phone number of CASA program: \_\_\_\_\_

⑫ ☐ The caregiver has been designated by the judge as the child's prospective adoptive parent or parents.

Child's name: \_\_\_\_\_

- 13 ☐ The caregiver may meet the definition of prospective adoptive parent or parents. A form JV-321, *Request for Prospective Adoptive Parent Designation, Notice, and Order*, will be filed with this objection and request for hearing.

- 14 The social worker should not remove the child from the caregiver's home because (*give reasons*):

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If you need more space, attach a sheet of paper and write "JV-324, Item 14—Reasons to Not Remove Child" at the top. Number of pages attached: \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct, which means if I lie on this form, I am committing a crime.

Date: \_\_\_\_\_

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 Type or print your name

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 Sign your name

### What if I am deaf or hard of hearing?



#### Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the proceeding. Contact the clerk's office or go to [www.courtinfo.ca.gov/forms](http://www.courtinfo.ca.gov/forms) for *Request for Accommodations by Persons With Disabilities and Response* (form MC-410). (Civil Code, § 54.8.)

Child's name: \_\_\_\_\_

Case Number:

Clerk stamps date here when form is filed.

15 This hearing on the child's removal from the home of the prospective adoptive parent or parents took place on *(date)*: \_\_\_\_\_

16 The child's prospective adoptive parent or parents are:  
*(name)*: \_\_\_\_\_

*(name)*: \_\_\_\_\_

### The court finds and orders:

17 ☐ Notice was given as required by law.

18 ☐ The requested removal is not in the best interest of the child.  
The child will remain in the home of the prospective adoptive parents.

19 ☐ The requested removal is in the best interest of the child. The child is ordered removed from the home of the prospective adoptive parent or parents, and the designation as prospective adoptive parents is terminated. The agency may place the child with *(name)*: \_\_\_\_\_

20 ☐ Other orders *(specify)*: \_\_\_\_\_

Fill in court name and street address:

Superior Court of California, County of \_\_\_\_\_

Date: \_\_\_\_\_



\_\_\_\_\_  
*Judge (or Judicial Officer)*